IBLIOTHECA EDICA ANADIANA



BIBLIOTHECA MEDICA CANADIANA

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Bibliotheca Medica Canadiana est publié cinq fois par année par l'Association des Bibliothèques de la Santé du Canada. Les articles paraissant dans BMC expriment l'opinion de leurs auteurs ou de la rédaction et non pas celle de l'Association.

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The Bibliotheca Medica Canadiana is a vehicle for providing an increased communication among all health libraries and librarians in Canada, but has special commitment to reach and assist the smaller, isolated health library worker. Contributors should consult recent issues for examples of the types of material and general style sought by the publication. Queries to the editor are also welcome. Bibliographic references should conform to the format used in the Bulletin of the Medical Library Association, whenever possible. Submissions in English or French are welcome, preferably in both languages. Deadline for the next issue is: 07 November, 1980.

Editorial Address / Redaction

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Bibliotheca Medica Canadiana veut améliorer la communication entre toutes les bibliothèques canadiennes de la santé et les bibliothécaires eux-mêmes mais plus particulièrement rejoindre et aider ceux qui oeuvrent seuls dans les petites bibliothèques. La rédaction recevra avec plaisir commentaires et opinions. A ceux qui voudraient participer à la rédaction, on suggère de suivre pour les références bibliographiques le format utilisé dans le Bulletin of the Medical Library Association. Les articles, en français ou en anglais sont les bievenus, mais il serait préféreable de les rédiger dans les deux langues. La date limite pour un envoi à paraitre au prochain numéro est: 07 novembre, 1980.

FROM THE FIDITORS

This issue of the Bibliotheca Medica Canadiana marks the change in editors. Since there will be two editors, Pierrette and I have decided to alternate writing the editorial, but we are reserving the right to edit each other's editorial. The editorial will be co-signed and it will appear in both english and french.

We would like to start by expressing tribute to our former editor, P.J. Fawcett who has made the transition in editorship extremely painless for us. We all got together for the first time at the CHLA convention in Vancouver, last June. Over drinks in the bar, P.J. began the task of telling us what was involved in being editor. His enthusiasm and support helped to ease the panic we were facing. He kept telling us to be brave, have fun and everything would fall into place. Weekly, he started sending all the files, correspondence, etcetera that goes along with being editor. He also made sure that we would fill this issue and has provided us with an article. For his continual support over the last couple of months, we wish to say thank-you for getting us off to a good start, and wish him good luck in his future endeavours.

Essentially, the BMC will continue to be published along the same lines and with the same editorial policy as has been done in the past. I draw the readers attention to a new column (appearing in this issue) entitled 'THE CANADIAN SCENE...PEOPLE ON THE MOVE'. This column will report the comings and goings of our fellow colleagues across Canada: moves from one place to another; staff changes; staff appointments, etcetera. The Postcript will be replaced by LETTERS TO THE EDITOR. We urge you to send us letters voicing your opinions on various issues in the health field that you feel might be of interest to our readers.

We see the Bibliotheca Medica Canadiana as a newsletter that fills a very important gap in communication. It enables our colleagues who do not have the opportunity to attend annual meetings or who do not have access to large resource libraries a vehicle for keeping in touch. To this end, we thank all of you who have contributed articles to the BMC in the past, and to those who will do so in the future. In addition, we acknowledge the work of the BMC correspondents in keeping us informed as to what is happening in the different regions.

Finally, we wish to acknowledge David Crawford, Publications Chairman of BMC, for his faith in us and his involvement in putting the issue together and seeing that it gets mailed to all of us.

We hope that the future of Bibliotheca Medica Canadiana will be as exciting and informative as we have all become accustomed to in the past.

Sincerely,

Alene Treenberg

Piecoto Dulin

MOT DE LA REDACTION

Voilà qui est fait: B.M.C. a changé d'éditeur! Ce premier numéro est pour nous deux, Pierrette et moi, une expérience nouvelle que nous n'abordions pas sans appréhension. C'est pourquoi nous voulons dire, dès le départ, notre reconnaissance à notre prédécesseur, P. J. Fawcett qui nous a facilité la transition.

Nous nous sommes rencontrés pour la première fois à Vancouver, en juin dernier, à l'occasion de notre assemblée annuelle. L'aventure ne nous paraissait pas si folle au premier abord, peut-être à cause du fait que nous étions installlés devant un verre et non pas devant notre dactylo! Ce n'est qu'une fois revenues à Montréal que l'ampleur de la tâche nous est apparue. P. J. restait attentif à nos premiers pas et nous expédiait régulièrement des envois réconfortants: nouvelles, commentaires, suggestions. Il nous disait: "Soyez braves, amusez-vous et le tour sera joué!" Et voilà que le numéro quatre est complété. Je peux maintenant rédiger cet éditorial en connaissance de cause et vous dire combien nous devons à P. J. pour l'encouragement qu'il nous a prodigué depuis deux mois.

En principe, B.M.C. va continuer de paraître au même rythme, suivant la même politique et les mêmes directives que par le passé. Une seule innovation: la chronique intitulée "The Canadian Scene... People on the Move". Sous ce titre, nous signalerons le va et vient de nos collègues à l'intérieur des frontières canadiennes: déménagements et promotions, changements, innovations, etc. Le mot de la fin ou Postcript sera aussi remplacé par les lettres aux éditeurs... à la condition que vous vouliez bien nous faire parvenir vos commentaires, remarques et suggestions. La parole est à vous! En attendant vos lettres, nous vous offrons dans ce numéro un texte de notre prédécesseur, P. J. Fcett.

En tant qu'éditeurs, nous croyons que Bibliotheca Medica Canadiana joue un rôle de premier plan dans la communication indispensable aux spécialistes de l'information que nous sommes en nous permettant de rester en contact en dépit de la distance et du fait que nous ne pouvons tous participer aux réunions annuelles. C'est pourquoi nous sommes particulièrement reconnaissantes à tous œux qui veulent bien donner de leur temps et de leur énergie en écrivant des articles ou en nous fournissant des nouvelles qui nous tiennent tous à jour, comme nous le sommes à l'égard des correspondants régionaux pour leurs envois réguliers.

En dernier lieu, nous voulons dire à David Crawford, directeur des publications de notre association, combien nous avons apprécié ses conseils et son appui constant depuis notre nomination.

Enfin, à nos lecteurs et collaborateurs, nous espérons offrir des numéros qui soient dans la tradition de B.M.C., c'est à dire à la fois instructifs et passionnants.

Millette Duche

Amicalement, Auchberg

BILAN DES REALISATIONS DE L'ABSC EN 1979-1980

- MARTHA B. STONE

Dresser l'inventaire des réalisations de l'ABSC en 1979-1980 m'amène à dire, tout d'abord, que cette année a été extrêmement productive! Notre jeune association a bénéficié constamment de l'enthouiasme, de l'élan et du dévouement de tous ceux qui se préoccupent du rôle et du développement des bibliothèques médicales au Canada. Après avoir espéré pendant si longtemps l'essor de notre association et après avoir assisté à la 4e assemblée annuelle, je constate avec plaisir que cette année a permis la mise en place d'une infrastructure solide ainsi que l'établissement de contacts suivis entre les différents échelons de l'organisation.

J'attire l'attention de ceux d'entre vous qui n'ont pas participé à la réunion de Vancouver, sur l'intérêt qu'elle a présenté. J'espère que la lecture des rapports des comités et des sections régionales vous permettra de vous rendre compte des progrès accomplis. L'activité déployée par les sections, et leurs réalisations, sont extrêmement encourageantes. Chacune des régions s'est fixée un but et s'attache à un domaine particulier. Pour moi qui ai connu la situation des bibliothèques médicales canadiennes telle qu'elle existait il y a dix ans, il est réconfortant de voir l'ampleur des efforts déployés par les sections en faveur des bibliothèques médicales et de l'ABSC.

Cette année a vu, également la mise sur pied de projets spéciaux. Je suis heureuse que l'ABSC s'occupe de la participation de bibliothécaires de pays en voie de développement au 4e Congrès International des Bibliothécaires Médicaux qui se tiendra en spémbre à Belgrade (Yougoslavie). Que le Canada, par l'entremise de notre association, puisse financer la participation de bibliothécaires du Tiers Monde aux échanges d'information dans le domaine des sciences de la santé est certes une action dont tous les bibliothécaires peuvent être fiers. Nous remercions donc l'ACDI pour son aide, ainsi que Madame Frances Groen, bibliothécaire médicale de l'Université McGill, pour son rôle extrêmement actif et l'intérêt suivi qu'elle a porté à cette question.

Les membres de l'association ont approuvé, lors de la réunion de Vancouver, un nouveau projet: la publication d'une "Histoire des bibliothèques médicales canadiennes et leur rôle". Cet ouvrage sera élaboré par Doreen Fraser, professeur de bibliothéconomie à l'Université Dalhousie, et publié conjointement par l'Ecole de Bibliothéconomie de l'Université Dalhousie et par l'ABSC. L'Université se chargera du financement, de la production et de la diffusion de l'ouvrage dans le cadre de sa série de publications consacrée à divers sujets intéressants l'Ecole de Bibliothéconomie. L'ABSC, de son côté, se chargera d'assurer la qualité du texte. A cette fin, l'association a créé un comité consultatif qui aura pour tâche d'aider Doreen Fraser à élaborer le plan de l'ouvrage et le calendrier de publication, et d'assurer la liaison avec le conseil d'administration. Ce projet a fait l'objet d'un exposé extrêmement détaillé à l'assemblée annuelle, à Vancouver, et a recueuilli, par vote, la pleine adhésion des membres de l'association.

La troisième réalisation a été le rénforcement de l'infrastructure de notre association. Comme notre bulletin le mentionnait il y a quelques mois, l'ABSC a été constituée en société, au niveau fédéral, en décembre 1979. L'assemblée annuelle a approuvé les amendements qui, de ce fait, on dû être apportés aux statuts déposés en mai dernier. Désormais, notre association fonctionne selon des statuts reconnus officiellement par le Ministère de la Consommation et des Corporations.

Le président du comité des statuts, Eileen Bradley, de l'université de Toronto, vous invite à lui faire parvenir toute remarque, question ou recommendation que vous voudriez formuler au sujet des modifications aux nouveaux statuts, c'est-à-dire aux règlements de l'association. Ces modifications seront soumises à la prochaine assemblée annuelle et ajoutées aux règlements.

En vertu de la loi, l'association utilise maintenant comme adresse une boîte postale officielle. Toute correspondance destinée à l'ABSC doit donc dorénavant être adressée à: Boîte postale 983, Succursale "B", Ottawa, Ontario. KIA 5Rl. Des dispositions ont été prises pour que le courrier nous soit livré régulièrement.

Les rapports des comités qui furent publiés dans le numéro 3 vous donneront une bonne idée des autres réalisations et activités administratives de l'association. Ils méritent d'être lu avec attention, car ils témoignent de l'ampleur de la tâche accomplie. C'est en écoutant, ou en lisant, les rapports présentés à la réunion du conseil d'administration et à l'assemblée annuelle que j'ai pris connaissance, avec beaucoup d'admiration, de la somme de travail effectuée par ceux qui vous représentent. Je tiens à souligner ici l'ampleur de l'effort fourni par les membres du Conseil et à les en féliciter.

Enfin, j'adresse mes remerciements au comité chargé du programme de la 4e assemblée annuelle, tenue à Vancouver. Bill Fraser et les membres de son comité: Linda Einblau, BCMIS; Dianna Kent, Woodward Library; Deborah Newstead, Shaughnessy Hospital; David Noble, Agence pour la lutte contre le cancer. Tous ont oeuvré sans relâche pour assurer la réussite de la réunion. Le programme était extrêmement bien fait et portait sur de nombreuses questions auxquelles s'intéressent les membres. Je suis sûre que vous trouverez dans ce numéro et les suivants des articles rédigés à la suite de cette rencontre.

En ce qui me concerne, l'année a été difficile. Comme beaucoup d'entre vous le savent, j'ai changé d'emploi en février et les effets de ce changement ne sont pas encore complètement perçus. Grâce à l'appui de tous les membres du conseil d'administration, et à celui de mon employeur, le Centre de Recherche et de Développement International (CRDI), je suis néanmoins en mesure de déclarer que l'année 1979-1980 a été une excellente année.

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NEWS ITEM

DEPARIMENT OF NATIONAL HEALTH AND WELFARE, OTTAWA

Daphne Dolan, formerly librarian at Concordia University in Montreal, assumes the position of Chief of Departmental Services at National Health and Welfare, effective October 1, 1980.

She replaces Martha Stone who is now with the International Development and Research Center in Ottawa, as Associate Director of Information Sciences.

HEALTH SCIENCES RESOURCE CENTRE ADVISORY COMMITTEE - R. FRASER

The sixth meeting of the Advisory Committee on the Health Sciences Resource Centre met at the Academy of Medicine building in Vancouver on June 13th. Representing CHLA on the Committee were M.A. Flower, Anna Leith and Bill Fraser, chairman. Other members attending were Pierette Dubuc representing ASTED and Ann Nevill from ACME. Eve-Marie Lacroix, HSRC and Elmer Smith, Director of CISTI were also present as ex-officio members.

CISTI has agreed to pick up subscriptions to infrequently held journals allowing other Canadian libraries to discontinue their subscriptions. Documentation of savings from this policy should continue to be sent by large libraries to the Director of CISTI.

A proposal for a published guide or handbook to Canadian health statistics is being discussed by the Committee. A sub-committee of Anna Leith, Diana Kent and Bill Fraser will prepare the detailed proposal outlining the needs, parameters, estimated costs and potential users for such a guide. This is to be submitted to the Director of CISTI.

Good news for some Medline users is the announcement that the Toxicology Data Bank will soon be available in Canada. Mr. Smith with George Ember and Eve-Marie Lacroix attended the dedication of the Lister Hill Center for Biomedical Communication at NLM on May 22. Mr. Smith reported that he thanked Dr. Martin Cummings on behalf of the Canadian health sciences community for the continuing support from the National Library of Medicine in health information.

A request from Ottawa libraries for CISTI's assistance in creating a local union list of serials was discussed. It was pointed out that CISTI's mandate is a national one and, because it is not a granting agency, it cannot help fund local projects in any way. The committee concluded that regional union lists are best developed and maintained at the local level and recommended that HSRC restrict its involvement to an advisory role.

CISTI's outreach program for regional development was brought up at the Vancouver meeting. Some of its national programs were reviewed. These include document delivery service, location searching, the CAN/DOC ordering facility on CAN/OLE and the development of the national health sciences collection in coordination with the 16 medical school libraries. In relation to Interlibrary Loans the Calgary experiment in the provision of a courier service for efficient delivery was described. Preliminary results showed this service to be cost effective and approximately five times faster than the normal postal service. CISTI's plan is to expand this service from Vancouver to Halifax.

The National Library's report "Future of the National Library of Canada" was the final topic for discussion. The committee agreed that the implementation of recommendations 8 and 10 of the National Library report would have a negative impact on service to the scientific, technical and medical communities.

The Advisory Committee meets again at CISTI on November 10th. Any CHLA/ABSC members who might have items for the agenda of that meeting are urged to contact one of the members of the Committee.

MORE ON THE MLA CHLAVABSC BILATERAL AGREEMENT... THE MLA PERSPECTIVE - GFRAID J. OPPENHEIMER

As the first official Medical Library Association representative, provided for under the terms of the MLA CHIA/ABSC Bilateral Agreement, I had the great privelege of attending the Vancouver meeting of the CHLA/ABSC this past June and to enjoy the company of colleagues, both old and new. It was my pleasure to convey to the CHLA/ABSC participants the belief held by the MLA membership and Board that the Bilateral Agreement holds great promise for both parties.

There are, it appears, some immediately realizable benefits to the CHIA/ABSC. A beginning has been made in removing real and psychological barriers caused by political boundaries in the interest of strengthening professional ties. While the two associations cooperate on the institutional level and thus preserve the integrity of Canadian interests, Canadian members of MLA will be able to participate fully as principal members of MLA chapters and thus continue their long tradition of rendering valuable service to our profession. The educational program of the CHLA/ABSC can be notably enhanced by access to MLA syllabi to be translated and ammended so that Canadian content may be included, and a stimulus may be created for even greater activity in continuing education.

MIA, as well, will reap advantages from the implementation of this important document. MIA, as an international organization, will be able to demonstrate its interest in and involvement with a non-U.S. sister society. The Bilateral Agreement will serve MIA as a paradigm and testing ground for cooperation with other associations which share with MIA common objectives. It appears to me, just the right instrument to do justice to an organization the bulk of whose membership is located in one country but whose aspirations are not limited to these members' interests alone, and transcending this national limitation, form close bonds with other organizations walking in the same direction.

For both CHLA/ABSC and MLA, sporadic communication should be a thing of the past. The Agreement requires not only an exchange of publications but will enhance contact by the device of having official representatives at each other's annual meetings. As the role of these individuals becomes more sharply defined and there is continuity from meeting to meeting, their value as spokesmen and links will provide an even closer connection.

The text of the Bilateral Agreement should only be regarded as a beginning. As both partners become more involved, opportunities for considering additional ties, joint projects in other areas, perhaps with respect to other countries for scholarship purposes, for the improvement of communication technology, will become the foci of subsequent activity.

I would like to conclude these few remarks with a recommendation. As interests are identified which would be furthered by official contact with MLA under the conditions of the Bilateral Agreement, it seems advisable for CHLA/ABSC to appoint a working group which might raise the relevant questions, formulate the proposal, present it to the Board who then may wish to make a request to the MLA Board for a response in kind. I regard it as important that such an active approach is adopted by CHLA/ABSC if the Agreement is to become a useful instrument.

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Editor's Note: See BMC, V.1, No. 4, P.117 & V.1, No. 5, P.144, 1979 for other articles on MLA CHLA/ABSC BILATERAL AGREEMENT

G.J. OPPENHEIMER, DIRECTOR, PACIFIC NORTHWEST REGIONAL HEALTH SCIENCES LIBRARY, UNIVERSITY OF WASHINGTON, SEATTLE, WASHINGTON.

CONSUMER HEALTH EDUCATION -- WHAT ARE WE DOING IN CANADA? - J. MARSHALL

In recent years the role of the librarian in consumer health education has been hotly debated and discussed at meetings and in the literature. Whereas in the past many of us considered health prefessionals to be our only clientele, the current emphasis on health promotion and freedom of information has done a great deal to broaden our horizons. Many librarians now consider consumer health education to be a legitimate part of library service and are actively engaged in innovative programs to develop collections and services for laypeople.

At the 1980 Medical Library Association Annual Meeting in Washington, D.C., the Relevance Group proposed the following resolution which was passed by the general membership at the business meeting:

"Whereas consumers are demanding increased access to health information;

whereas gaining access to quality health information is a problem for much of the public;

whereas health information is recognized as a positive factor in promoting the health of the general public;

whereas health sciences librarians are qualified to respond to health information needs;

therefore, be it resolved that the Medical Library Association support, in principle, the consumer's right to health information and establish a task force to study the role of health sciences libraries in providing consumer health information; to explore various methods of cooperation with public libraries in this endeavor; and to develop guidelines for health sciences librarians to use in fulfilling that role."

We thought that it would be useful for us, as Canadian health sciences librarians, to share our interest and experiences in consumer health education through the BMC. If you would like to participate in this exercise (and we hope that you will), please send a one-page summary of your ideas, plans, or activities in consumer health education to either of the addresses below. We will undertake to edit the submissions and provide a summary in the next issue of BMC. If your work has been more extensive than can be described in a page, send us a longer article. It would be exciting to have a whole issue of the BMC dedicated to consumer health education. Remember that bibliographies or resources lists or patient education materials would be welcome too.

We will look forward to hearing from you by October 24, 1980.

Joanne Marshall Health Sciences Library McMaster University Hamilton, Ontario L8N 3Z5

or

Claire Callaghan Canadian Memorial Chiropractic College Library 1900 Bayview Ave. Toronto, Ontario M4G 3E6

CONSUMER HEALTH EDUCATION SUMMARY

Name:
Address:
Telephone:

Ideas/project summary/ bibliography/resource list, etc.:

(please attach if longer than one page)

IV F CONGRES INTERNATIONAL DE BIBLIOTHECONOMIE MEDICALE, BELGRADE, YOUGOSLAVIE, 2-5 SEPTEMBRE, 1980

- PIERRETTE DUBUC, HOPITAL SAINTE-JUSTINE, MONTREAL

Le premier congrès international de bibliothéconomie médicale eut lieu à Londres en 1953, le deuxième à Washington, D.C. en 1958, et le troisième à Amsterdam, en 1969.

Ces remantres se tiennent sous les auspices de l'Organisation Mondiale de la Santé et de l'UNESCO, mais c'est le pays qui est l'hôte du congrès qui est responsable d'en faire un succès.

Ce quatrième congrès était attendu avec impatience. Sur les quelque cinq cent participants, cent soixante-cinq sont venus de quarante-cinq pays différents. Le Sava Centar a été conçu en fonction de réunions internationales et se trouvait fort bien équippé pour faire face aux problèmes de la communication qui pouvaient se présenter. Il y avait, par moments, traduction simultanée en plusieurs langues, dont le serbo-croate, l'allemand et naturellement l'anglais, langue officielle du congrès. Mais cette fois, la langue anglaise n'était pas la langue de la majorité et ce fut une expérience nouvelle, pour une nord-américaine de langue française, d'échanger en anglais avec des personnes dont la langue maternelle était toute différente et partager ainsi la même difficulté d'expression!

Le Dr. Ines Wesley-Tanaskovic, présidente du comité d'organisation, fut chaudement applaudie par tous les participants àla fin du congrès pour son enthousiasme et sa largeur de vue qui ont marqué les délibérations.

Ie Canada comptait quatre retrésentants dont Frances Groen, M.A. Flower, Martha Stone et Pierrette Dubuc, lesquelles ont rencontrées les deux délégués des pays en voie de développement pour lesquels CHIA / ABSC avait obtenu une bourse. Tous furent d'accord pour reconnaître les multiples bienfaits que pareille rencontre apporte au bibliothécaire de la santé. Outre les quatre citées plus haut qui présentaient chacune une communication, Joanne Marshall de l'Université McMaster était parmi les auteurs mais elle ne put malheureusement se rendre et c'est Frances Groen qui donna son excellent exposé sur le rôle du bibliothécaire médical en milieu clinique. Martha Stone jouait le rêle de "rapporteuse" pour le Comité des Résolutions et Frances Groen ⊅résidait l'une des trois réunions pléniaires.

On trouvera plus d'information sur les sujets discutés et les résolutions importantes adoptées à ce congrès dans les prochains numéros de B.M.C.

HISTORY OF HEALTH SCIENCE LIBRARIES AND LIBRARIANSHIP, 19 9-1979

Those present at the Vancouver conference of CHLA last June, heard from Doreen Fraser of the School of Library Service at Dalhousie University, how the decision of writing the History of Health Science Librarianship in Canada came about. We recently received some five pages of notes on this which we are unable to include in this issue. However, we call your attention to this project at this time. You may participate either individually or through your local chapters. Please contact Doreen Fraser at the School of Library Service, Dalhousie University, Halfiax, N.S. B3H 4H8 for more information. The next issue of BMC will carry further details.

STATISTICAL SOURCES FOR CHRONIC CONDITIONS AND SPECIAL HEALTH PROBLEMS - GUY A. COSTANZO

This address will provide a practising person's perspective on the problems of gathering statistical material related to chronic conditions and special health problems. For the purposes of this address, I will define a chronic condition as 'any condition likely to impair the full functioning of an individual over and extended period of time' and a special health problem as 'a problem you cannot conveniently classify elsewhere'. Examples of chronic conditions include diabetes, hypertension, blindness, chronic renal failure, mental illness, and chronic obstructive lung disease. Examples of special health problems include alcoholism, drug abuse, smoking, accidents, suicide and abortion.

Librarians are specialists at uncovering information from the published material housed in libraries, passing it on to clients who are <u>not</u> so expert. There exists a symbiotic relationship between the librarian and the professional research worker. Each supplies the other with valuable material.

Some statistical material pertaining to chronic conditions and special problems exists in published form - unfortunately, it is not always in the form or detail clients want it. For the librarian, it means the difference between; "I know that exists and I will leok it up", versus "I wonder if that exists and, if so, where should I go for it?" This distinction means that a certain degree of detective work will be required of the librarian.

You can sometimes go back to sources and get information in the form you want it if you know where to look.

There is a distinction between raw data collection and aggregation. There are also a number of levels at which raw data can be aggregated into information. The 'supreme aggregator' in this country is Statistics Canada. Because of the number of raw data collectors and the multiple points of aggregation, there is a good chance that two people will not collect or present the same piece of information in the same way (See Figure 1) Fortunately, vital statisticians and medical records librarians, hospital insurance people, medical health officers and public health departments, etc. recognize this to some extent and there are periodic efforts made to meet and to standardize data collection procedures and presentation. (Hence, the International Classification of Diseases, Adapted for example, or the Interprovincial Committees of Vital Statisticians that meet in Canada)

The first clues as to where to look for useful information will come from defining the scope of the condition or problem under consideration. This sounds elementary, but it is not necessarily as easy a task as it looks.

For example, we have staff of physicians and nurses who work closely with the local School Board. Naturally, children with health problems are hidden away there, and it is our responsibility to see that they are referred for care to ensure their optimal functioning. This means that you should know what is wrong with them in the first instance. One of our doctors commonly identified the FIX Syndrome in children screened, - "I dunno what's wrong with him - he's just a funny little kid!" (For example, learning disabilities involves a number of conditions of different severity which are not necessarily mutually exclusive).

Once you define what you are looking for, the problem of where to look looms large. Here it helps to use your imagination and picture yourself as actually having the condition or problem under consideration and deciding where you would likely go for help. Would you be a ward of the Ministry of Health? What Branch? (The Division of Aid to the Handicapped, for example - Look to your Ministry's Annual Report for clues). Have you been hospitalized? Do you have private agencies lobbying for service for others with your condition? (Cerebral Palsy Association, Stroke Association, Arthritis and Rheumatism Society etc.). This problem is made considerably easier if you are dead. Then you are automatically included in a fairly comprehensive and easily accessible statistical base.

If you are interested in morbidity, it's another matter. It is likely that no agency of the health care system will have knowledge of 100% of the population under consideration. Always, stress the limits of ascertainment to clients seeking information on chronic conditions or special health problems. For example, not all cases will be hospitalized, so 'hospital discharges' presents an incomplete picture.

Many more people will see a physician but in B.C., for example, the Medical Services Commission does not yet record diagnostic codes from the physician's billing procedure, although there are plans to work on this in the future.

The Canada Health survey would have included a good deal of information on chronic condition prevalence, but it has been discontinued and the first round of results will not be available until the fall of 1980. Incidentally, there is lobbying going on to resume the Canada Health Survey, but no offical action has taken place to date.

In British Columbia, we have, within the Ministry of Health, a Health Surveillance Registry. It was begun in 1952, as a handicapped children's registry, but has expanded to include adults and a much broader range of handicaps. Other specialized registries exist and you should be aware of these in your own Province.

Special surveys are constantly being conducted to identify needs in particular groups. Look to the 'disease clubs' for reports of these and Ministry of Health-sponsored undertakings. In B.C. currently, there is an inter-ministerial committee to study the needs of the severely handicapped.

There is also a trend to house the raw data from such surveys on magnetic tape in data libraries. The University of British Columbia has one, for example, that has grown very rapidly in recent years. It may not be possible for a client to extract, or have extracted for him, specialized information from a file housed in one of these libraries. Consult with your university library and computing centre.

Local health departments keep tabs on a wide variety of conditions depending on local program priorities. Look to them for information on the non-reportable communicable diseases, for example, or for tropical or rarely occurring diseases.

In Vancouver, have a United Way-sponsored community infromation service that publishes and updates a comprehensive <u>Guide to Community Services</u>. Look to such a guide for specialized agencies in your own area. Also check your yellow pages under 'Associations' and your government listings under 'Health' and 'Human Resources'. In B.C., all of these Ministries have Research Officers on staff who can outline current data-gathering practices and handle specialized requests for tabulations.

In summary, the following six steps should furnish clues as to where the information on chronic conditions and special health problems can be obtained, and in what format pertinent to the needs of the user:

- 1. Define the scope of the condition under consideration.
- 2. Consider where in the Health Care System a person in those circumstances would make contact.
- 3. What agencies specifically might be involved?
- 4. Do they publish official reports ?
- 5. Do they have internal data that might be useful?
- 6. Can you get your hands on it in reasonable time ?

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UNE HISTOIRE DES BIBLIOTHEQUES DE LA SANTE AU CANADA

A l'assemblée annuelle de Vancouver, en juin dernier, Doreen Fraser, de l'Ecole de Bibliothéconomie de l'Université Dalhousie, présentait un projet d'importance pour les bibliothécaires médicales. Il s'agit de rédiger, en collaboration avec tous ceux qui y ont participé, l'histoire des bibliothèques de la santé au Canada, depuis 1959 jusqu'à 1979.

Doreen nous a présenté le plan de l'ouvrage, les titres des différents chapitres, ainsi que son calendrier pour la réalisation de ce projet. C'est à la suite d'une entente avec le Dr. Norman Horrocks, directeur de l'Ecole de Bibliothéconomie et éditeur de la série Occasional Paper (ISSN 0318-7403) que CHLA/ABSC peut envisager cette publication.

Nous avons reçu cinq pages décrivant ce projet à votre intention que nous ne pouvons malheureusement inclure dans ce numéro, mais nous désirons attirer votre attention sur ce projet car il est important que chacun puisse y apporter sa participation, à titre individuel ou à l'intérieur d'un rapport de section.

Le point de départ de cette étude est la communication présentée en 1959 par le groupe des bibliothécaires des facultés de médecine à la conférence de la Medical Library Association tenue à Toronto. Le texte fut publié plus tard dans la revue de l'association, plus précisément en avril 1960.

Un appel est particulièrement adressé aux bibliothécaires du Québec car Doreen ne possède pas d'information ni de documents à ce sujet.

On peut communiquer avec Doreen Fraser à l'adresse suivante:

830 McLean Street, app. 24, HALIFAX, B3H 2T8. Téléphone: 902 - 423-3075 (rés.)

ou encore à la Kellogg Library : 902 - 424-2458, dont l'adresse est: Kellogg Library, Dalhousie University, B3H 4H7.

CANHELP CORNER

- M.A. FLOWER

Topics which should be covered in the forthcoming national CANHELP Seminar on Canadian Health Library Interfaces are quite various. They should cover aspects, not only of hospital library activities, but also of the institutions and professions with which these libraries normally interact. All shades of opinion should be voiced, so that the dialogue which starts with the Seminar can continue to clarify the issues which arise, and so that further contact between health library people and other health workers may develop spontaneously out of the on-going discussions.

Central to the debate should be the way libraries work in a hospital setting, and how this is affected, a) by the size of the hospital, and b) by whether it is a teaching hospital or a community hospital. The type of community in which the hospital is situated may have a decided bearing, especially on the type of personnel the hospital is able to provide for the library.

What is the relationship of the library in different-sized hospitals to the administrator? to the medical and nursing staff? to other health care personnel in the hospital? to health care personnel outside the hospital, such as community health workers? to patients? to the families of patients? How is such a library funded in Canada? On what basis does it share resources with other institutions? How does it relate to back-up services from a university? from a government departmental library? from a professional association library? Who provides the funding for union lists, courier services and other forms of cooperation?

Continuing education is another major topic. Besides the provision of on-going training for health library personnel, there is the whole question of the role hospital libraries might play as access points in the continuing education of other health professionals.

Members of CHLA/ABSC should think about these questions in relation to their own areas. If there is someone in your locality who is knowledgeable about any aspect of these health library activities, either from the point of view of the library practitioner, or from that of a health field user, please send that person's name to a member of the CANHELP COMMITTEE. If there is a particular approach to one topic which you feel should be handled a certain way, let us know who you think might do the best job at it.

It is to be hoped that the people whom you suggest will range across all the provinces of Canada, and across all the disciplines in the Canadian health field, not to mention all the divergencies of opinion that are possible. Those who are willing to participate in our CANHELP Seminar in response to a written invitation will add immeasurably to our program. And they will be representing YOU.

THE CANADIAN SCENE.....

PEOPLE ON THE MOVE

- KELLOGG HEALTH SCIENCES LIBRARY, DALHOUSIE UNIVERSITY, Halifax

NEW STAFF: Catherine Krause and William Owen joined Information Services at the Kellogg Library on May 1, 1980. Cathy takes over as Dental Librarian and Bill has special responsibility for the School of Human Communications Disorders. Both are 1980 graduates of Dalhousie School of Library Service.

- MCGILL MEDICAL LIBRARY, MCGILL UNIVERSITY, MONTREAL

Claire Turnbull, who has worked at the McGill Medical Library since 1973, most recently as Head of Public Services has left the library on moving to Guelph, effective July 31, 1980. Claire's technical and managerial competence will be greatly missed by library staff and users.

Wendy Patrick, who has been the Botany-Genetics Librarian at McGill since 1973 and previous to that was in the Medical Library's Reference Department prior to that appointment, has been appointed Acting Public Services Librarian effective October 1, 1980. She will continue her administrative duties as Botany/Genetics Librarian. Wendy's experience in both the Medical and Botany/Genetics Libraries will be of great assistance in the development of long range plans for library services in the Life Sciences Area. Mr. Albert Tabah has accepted the position of Reference Librarian in the Botany/Genetics Library.

Susan Hamrell has been appointed Computer Services Librarian effective September 1, 1980. Mrs Hamrell's most recent position was at Duke University and she has had extensive computer searching experience there and at other institutions.

Carmo Andrade has been appointed Assistant Catalogue Librarian effective June 1, 1980. Ms Andrade graduated from the McGill Library School in 1979 and has been working in the Medical Library at McGill on a non-appointed basis since November 1979.

Jean Benson, Head of Reference, will be leaving Montreal in November 1980. She and her family are moving to Toronto.

- HEALTH SCIENCES LIBRARY, MCMASTER UNIVERSITY, HAMILTON

Elizabeth Uleryk, formerly Computer Services Librarian at McGill Medical Library, has been appointed Information Services Librarian (Reference and Circulation). She replaces Claire Callaghan, who has become the Director of the library at the Canadian Memorial Chiropractic College in Toronto.

Sharon Branton, Cataloguing Librarian, was elected Chairman of the Ad Hoc Health Sciences UTLAS Users Group for 1980/81, effective June 20, 1980.

- TORONTO MEDICAL LIBRARIES GROUP, TORONTO

CHANGE OF OFFICERS: The incoming Chairman, Mrs. Lorraine Spencer Garry has resigned and will now be replaced by the Chairman Elect - 1980-81 Mrs. Edna Allen, Reference Librarian, Warner-Lambert Canada Ltd., Scarborough, Ontario.

- UNIVERSITY OF MANITOBA MEDICAL LIBRARY, WINNIPEG

PJ Fawcett, former editor of the BMC, has resigned his position as Assistant Medical Librarian at the University of Manitoba Medical Library and will be leaving the Health Library field. Following a sojourn in Europe, PJ will return to Winnipeg to assume the position of Systems Coordinator for the University of Manitoba Libraries, effective October 1980.

Ms. Judy Inglis is the new Extension Services Librarian at the University of Manitoba Medical Library. Judy graduated from the University of Guelph with a degree in zoology and took her Master of Library Science at the University of Western Ontario. She has spent the last year working in a veterinary hospital in Japan and her previous work experience includes studying beaver populations in northern Alberta.

NEW MEDLINE CENTRE

The Library of the Ontario Hospital Association was officially established as a Medline Centre effective September 1, 1980. Service will be offerred initially on a cost recovery basis to member institutions. For further information contact John Tagg , Librarian at (416) 429-2661, ext. 319. They are also offering retrieval service on QL Systems data bases.

LIBRARY TO MOVE TO NEW QUARTERS

The Sunnybrook Medical Centre Health Sciences Library in Toronto is scheduled to move to new quarters of 5000 square feet accommodating 20,000 volumes, at the end of 1980.

PUBLICATIONS

Linda Solomon, Director of Library, Canadian Hospital Association has recently published an article entitled Basic Library Tools for Health Administrators, in DIMENSIONS IN HEALTH SERVICE, 57; No. 7, 1980 (July).

UPDATE ANNOUNCEMENT - The last issue of BMC (Vol. 2, No. 3, 1980, p.82) made reference to the article being published by Dorothy Fitzgerald but did not mention the name of the journal. Please note full reference... Fitzgerald, Dorothy. Basic Library List for Family Medical Centres. CANADIAN FAMILY PHYSICIAN 1980 Aug; 26:1066-1073.

REPORT ON THE ...

FOURTH INTERNATIONAL CONGRESS ON MEDICAL LIBRARIANSHIP, BELGRADE, YUGASLAVIA, SEPTEMBER 2-5, 1980.

- PIFRRETTE DUBLIC

The First International Meeting on Medical Librarianship was held in London in 1953; the Second was held in Washington, D.C. in 1958; and the Third was held in Amsterdam, in 1969.

These meetings are sponsored by WHO and UNESCO, but it is the country where the meeting is held that must be given credit for a successful reunion.

This Fourth Meeting was long overdue. Out of the five hundred (500) participants, some one hundred and sixty five (165) came from as many as forty-five (45) different countries. SAVA Center in Belgrade was a well chosen set-up for all the sessions. Rooms were comfortable and the technical background was supportive of the communication problems that could arise. Dr. Ines Wesley-Tanaskovic, Chairman of the Organizing Committee, was warmly ovated by all participants at the closing session. She brought a great deal of enthusiasm and devotion to the organization of the congress.

Canadian delegates included Frances Groen and M.A. Flowers of McGill University; Martha Stone of IDRC, Ottawa and President of CHIA; and Pierrette Dubuc of the Ste Justine Hospital, Montreal. The Canadian delegates met informally with the two delegates from the developing countries whose attendance at the Congress was sponsored by CHIA. The four Canadian representatives each presented a paper at one of the various group meetings. In addition, there was a paper from Joanne Marshall of McMaster University which was read by Frances Groen. Martha Stone was "rapporteuse" for the Drafting Committee and Frances Groen presided over one of the three plenary sessions.

One special outcome of the Belgrade meeting which may be of interest to our readers is the concept of "twinning" of medical libraries from country to country in order to share experiences as well as resources, such as duplicates, bibliographies, etcetera.

Future issues of BMC will carry more information on topics discussed and important resolutions adopted in Belgrade.

FOR SALE

Three unused MICROFILM READERS, 2 AUTOGRAPHIC LCR 1100 and 1 AUTOGRAPHIC LCR 1100-2.

16 mm MICROFILM READERS with friction index drive; lens magnification 48x.

Purchased from Bell & Howell in February 1978 for a unit price of \$1,055.

FOR SALE AT \$500.00 each or NEAREST OFFER...

APPLY AT: HEALTH SCIENCES LIBRARIAN,

McMASTER UNIVERSITY,

HAMILTON, ONTARIO. L8N 3Z5.

CENTRE BIBLIOGRAPHIQUE DES SCIENCES DE LA SANTE, ICIST - EVE-MARIE LACROIX

Accès au fichier de toxicologie

A compter du ler octobre 1980, les centres MEDLINE canadiens auront accès au fichier Toxicology Data Bank (TDB), décrit dans le dernier numéro. Ce fichier, qui complète TOXLINE, CHEMLINE et RIECS du service MEDLARS, sera offert au même tarif par heure de connexion que MEDLINE, soit 15 \$EU (heure de pointe) et 8 \$EU (heure creuse), et à 15 ¢EU par page imprimée en différé. Pour de plus amples renseignements, communiquer avec Mme Bonnie Stableford du CBSS.

Bibliographie sur les terminaux à écran

Devant le nombre croissant de questions reçues à ce sujet, le CBSS et le Service de recherche bibliographique de l'ICIST ont préparé une bibliographie qui se rapporte aux effets des terminaux à écran sur la santé.

Une recherche détaillée, à la fois manuelle et automatisée, a été effectuée. Quelques références se rapportent aux rayonnements émis par les terminaux à écran, mais il est question surtout du stress visuel. Les sources dépouillées englobent Safety Science Abstracts, MEDLINE, Ergonomics Abstracts, Excerpta Medica, IABORDOC, INSPEC, Engineering Index, ABI/Inform, NTIS et le bulletin d'hygiène professionelle et de sécurité de la bibliothèque du ministère du Travail de l'Ontario.

On peut en obtenir copie auprès de Mme Dianne Pammett, du Service de recherche bibliographique de l'ICIST (tél. (613) 993-2013).

L'ICIST a récemment obtenu tous les programmes actuels des cours d'éducation permanente de la MLA. On peut se les procurer par l'entremise du Service de prêts entre bibliothèques.

Infoscope, le bulletin de nouvelles de l'ICIST, est maintenant publié tous les trois mois. Si vous souhaiter vous tenir au courant des activités de l'ICIST, Infoscope est diffusé gratuitement: il suffit d'écrire à la Section des publications, ICIST, CNRC, Ottawa, KIA 0S2.

COURSES, WORKSHOPS...

During January-April 1981, the staff of the Kellogg Library, Dalhousie University, will be presenting a course on Health Sciences Bibliography to students of the Dalhousie University School of Library Service. The course will be co-ordinated by the Health Sciences Librarian, Ann Nevill.

A one-day workshop "Your Hospital Library and Accreditation" was held on September 25, 1980 at the Moncton Hospital, Moncton, N.B. The workshop was coordinated by Mrs. Isobel Wallace of the Health Sciences Library of the Moncton Hospital. It was particularly aimed at those who wish to organize a hospital health sciences library. For more information, please contact Mrs. I. Wallace, The Moncton Hospital, Health Sciences Library, 135 MacBeath Ave., Moncton, NB. ElC 628.

LIBRARY ACQUISITIONS

McMaster University Health Sciences Library has just received its first COM (Computer Output Microfiche) catalogue. This first annual cumulation contains all of the Library's catalogue records save for some audiovisuals. Periodicals are NOT on the COM, but Continuations are. In between each annual edition of the full COM catalogue, there will be bimonthly cumulating supplements and biweekly acquisitions lists. (The paper lists are for internal use only. Copies will not be available for distribution until the next annual cumulation).

Also, the Health Sciences Library of McMaster University has completed its pioneer work as the first "MEDICAT" library and as the first users of the National Library of Medicine cataloguing tapes in North America. MEDICAT standards and editing guidelines came from this Library working with the Office of Library Coordination (COU) and UTLAS. Sharon Branton is the MEDICAT Resource Person for new libraries thinking of joining "MEDICAT" through UTALS. For any information or help you may need in addition to that given by UTLAS (or prior to joining UTLAS if you are considering it) please contact Sharon Branton, Cataloguing Dept., Health Sciences Library, McMaster University, Hamilton, Ontario. L8N 325. (Telephone Number: (416) 525-9140, ext. 2326).

AVAILABLE ON INTERLIBRARY LOAN

From the Health Sciences Library, McMaster University, Hamilton, Ont. L8S 4J9.

- The Ontario Ministry of Health grant to evaluate the role of Clinical Librarian has been completed. This report is available on ILL by writing Joanne Marshall.
- McMaster's Health Sciences Library Report of the 1980 MLA Conference is now available on ILL. It consists of notes on the sessions attended by three of the librarians.

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JOB OPENING

THE HEALTH SCIENCES CENTRE, WINNIPEG, MANITOBA

One of the country's largest health care facilities is Manitoba's principal referral centre for complex health problems, and the Province's major teaching and research hospital. The Centre's components include Paediatric, Obstetric, Rehabilitation and Oncology facilities, and there is a hospital-based School of Nursing. The Centre which has embarked on a major physical redevelopment plan and is currently undergoing an administrative reorganization, invites applications for the following position.

DIRECTOR OF LIBRARY SERVICES

The Director of Library Services will be responsible for the organization, administration and effective operation of libraries and library services within the Health Sciences Centre, and for the direction and supervision of library staff. He/she will be required to analyze existing resources in realtion to the library needs of a potential user population of 4,000 staff and students, and to make recommendations concerning resources and services required to meet these needs.

Applicants should possess a Master of Library Services degree from an A.L.A. accredited school and have had previous experience in Health Sciences Library services. Demonstrated management and human relations skills are necessary for this position.

This position is open to both females and males.

Interested persons should apply in writing including a resume detailing education and experience to the:

Manager Employment & Training
Health Sciences Centre
700 William Avenue
Winnipeg, Manitoba
R3E OZ3

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NEUROSIS AND THE MALE LIBRARIAN - PATRICK J. FAWCETT

Being neurotic, by itself, is not such a bad way to be.

In times like these, being neurotic has a lot of advantages. In my case, it gives me an excuse to pursue the pointless, to dream the ridiculous, and to tackle the impossible. It lets me cling to an inexplicable optimism in the face of deep and depressing realities. It lets me dream of achieving the unheard of, such as watching an entire football game without my wife finding things for me to do. Nor am I alone. Across the country, my brand of neurosis is amazingly popular, judging by the numbers of people who still support the Argonauts, vote Marxist-Leninist, buy Chryslers, or answer letters the same day they get them.

Being neurotic and being also a male librarian, however, is a vastly different proposition.

People never really know what to make of male librarians. They don't fit. According to the stereotypes perpetrated by both the media and the man in the street (who should know better than to be constantly standing out there anyway), librarians are always female. They may be spinsterish and old, or voluptuous and young, or expansive and dynamic, or withdrawn and catatonic. But they're female. They may be short or tall, fat or skinny, blonde or brunette, married or single. But always female.

And then there's guys like me.

Let's face it, little boys aren't supposed to grow up wanting to become librarians. They're supposed to emulate hockey players, truck drivers, linebackers and other macho types who can tear the top off a beer can in a tv commercial. Male librarians are always effeminate, meek little fellows with bow-ties who are too limp-wristed to open even a pop bottle. (I can meet part of those qualifications: I've fractured the same wrist twice.) And no kid grows up wanting to become one of them.

I did. I grew up wanting to become a librarian and it drove all my school counsellors crazy. I kept hearing phrases like "wasted potential" and "needing higher goals" as if the field of librarianship was something reserved exclusively for people who had already flunked out at trying to be dishwashers. Moreover, in an era when little boys were forbidden to play with dolls and larger boys were brainwashed into believing tears were a sign of weakness, the choice of such a blatantly feminine career was regarded as a dark foreboding of more problems yet to come. (One of my classmates in the eighth grade expressed an interest in becoming a nurse — they talked him out of it.)

Once I had entered university, I had become wiser (read: more devious) in the ways of the world. When pressed for comments about my post-degree plans, I alluded to vague options about pursuing "information science" or dabbling in "storage and retrieval". This left people with the half-formed impression of something related to computer science while in the darkest interiors of my mind, safe within the neurotic caves of inner honesty, I could stealthfully whisper to myself my ultimate, sinful goal: librarian!

By the time I reached library school, feminism was in full force and had infected a portion of the class. While "liberation" of women from traditional career restrictions was being touted as a Good Thing, it helped not a whit the unfortunate male trying (if you'll pardon the sexist expression) to make it in a women's world. Rather than my liberated classmates applauding

my career choice, I found myself periodically under suspicion. Because men constituted less than 20% of the library workforce but held over 80% of the administrative positions, the only reason I was entering librarianship, so I was told, was to subjugate more women.

Sigh.

But I knew that once I became a librarian all that sort of thinking would change. Once I got out into the field and demonstrated my skills, people would stop regarding me as just another male. Once I proved my abilities, people would be willing to overlook my masculinity (such as it is) and see me just as a person. Given the chance, I was sure I could prove myself the equal of any woman.

Not likely.

After close to a decade in librarianship, I'm still finding people who are very uncomfortable with male librarians. After seven years in the same medical library (as the only male on a staff of nineteen), a surprising number of people still think there's something decidedly strange about a grown man spending his time this way. Because I work mostly with computers and systems and other funny things that go whirr in the night, many prefer to think of me as a computer specialist rather than a (shudder) male librarian. Somehow, it's more comforting for them.

The reaction shows itself in several ways. I once spent an hour with a physician, interviewing him, writing a profile, and pulling some choice citations out of a datafile. The man was obviously impressed with both me and the computer (unfortunately, we tend to get lumped together) and chose to manifest his delight by saying: "You know, a bright fellow like you should consider trying to get into university..."

On another occasion, I designed a datafile and wrote some strange language to control it and submitted the results to a computer department type to check over. He favourably reviewed my efforts and then suggested, in a sincere and encouraging tone, that I should consider computer science when I tired of working in a library and finally decided what career I wanted to pursue.

Not recently, in conversation with a faculty member, I alluded to some experience as an undergraduate and he responded with surprise that I had ever been to college. I assured him I had and even allowed that I'd picked up a pair of degrees in the process. His reaction approached total shock. "Then what are you doing hanging around a library?" he bellowed. "Why don't you get out and get a job and make a name for yourself?"

Sigh.

But I'm not giving up. I'm thinking of having a large sign installed on the window of my office, one that reads: "Male Librarian. Permanent Career Choice and Happy With It". I spoke to my boss about it but she said the only sign she'd be willing to buy for that window would be: "Please Do Not Feed". (I think she knows where they can be gotten cheap...)

For the meantime, I think I'll just sit here and suffer from my delusions of gender.

^{*} P.J. FAWCETT, MEDICAL LIBRARY, UNIVERSITY OF MANITOBA, WINNIPEG, MANITOBA.

^{* (}EDITOR'S NOTE: Since writing this article, P.J. has changed jobs, ironically enough. See Page 101 for details)

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